Department of Transportation—federal Aviation Administration

Supplemental Type Certificate

Number SA3056SW-D

This certificate, issued to

Century Flight Systems, Inc.

F.M. 1195

P. O. Box 610

Mineral Wells, TX 76067

certifies that the change in the type design for the following product with the limitations and conditions

therefor as specified hereon meets the airworthiness requirements of Part 23 of the Federal Aviation

Regulations.

Original Product - Type Certificate Number A29EU

. Make: Britten Norman

Model: BN-2A MK.III

Description of Type Design Change:

Installation of Mitchell Automatic Flight System Model AK533 consisting of Century III Autopilot with Command/Automatic Electronic Pitch Trim System and Optional Radio Coupler and Glide Slope Coupler according to Bulletin No. 654, Revision 2, dated 10-17-75 and Master Drawing List No. 87A786, Revision B, dated 10-17-75.

Limitations and Conditions

FAA/DAS Approved Airplane Flight Manual Supplement, P/N 68S239, dated 5-22-75 for Britten Norman BN-2A MK, III.

Compatibility of this modification with other previously approved modifications must be determined by the installer. This certificate and the supporting data which is the basis for approval shall remain in effect until sur-

rendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the

Federal Aviation Administration.

Date of application :

5-16-75

Jule ressurd: 10-28-75; 6-22-84, Revision 2

Dale of issuance :

5-24-75

Tale amended

By direction of the Administrator

Don P. Watson

Manager, Aircraft Certification Division

Southwest Region

(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate. The FAA will reissue the certificate in the name of the transferee and forward it to him. TRANSFER ENDORSEMENT Transfer the ownership of Supplemental Type Certificate Number _____ to (Name of transferee) (Address of transferee) (City, State, and ZIP code) from (Name of grantor) (Print or type) (Address of grantor) (City, State, and ZIP code) Extent of Authority (if licensing agreement): Date of Transfer:

Signature of grantor (In ink):